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APPLICANTS

Curtis W. Thornton, Residence Not Provided;

Alberto Diaz, Residence Not Provided;

** CONTINUING DATA *****

This appln claims benefit of 60/406,574 08/29/2002 *BN*** FOREIGN APPLICATIONS ***** *NONE, BN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING 13	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

Alberto Diaz
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TITLE

Surgical stapler with removable staple cartridge

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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		<input type="checkbox"/> 1.18 Fees (Issue)
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